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STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER: The Bridgewater Tribune		2. DATE: 10/25/12
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE $: 26.41/28.30/31.00

4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): PO Box 250, Bridgewater, McCook, South Dakota 57319-0250

5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): PO Box 250, Bridgewater, McCook, South Dakota 57319-0250

6. FULL NAME OF PUBLISHER: Troy Schwans

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
Schwans Publications Inc	PO Box 220, Salem, SD 57058

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

None

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	580	580
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	13	13
2. Mail Subscription (Paid and or requested)	302	287
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	315	300
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	54	52
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	369	352
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	211	228
2. Return from News Agents	0	0
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	580	580

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

(Signature) Owner (Title)

State of South Dakota)
§
County of McCook)

Sworn to before me this 26th day of October, 2012

Laurie A. Laetsch
Notary Public

My commission expires: March 20, 2018

(Seal)

LAURIE A. LAETSCH
NOTARY PUBLIC
SOUTH DAKOTA

Form: SOS REC 051 7/2004

Troy Schwans PO Box 445 Salem, SD 57058

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